

### South Dakota Board of Nursing

South Dakota Department of Health 722 Main Street, Sulte 3; Spearfish, SD 57783 (605) 642-1388; Fax: (605)642-1389; www.state.sd.us/doh/nursing

### Nurse Aide Application for Re-Approval of Training Program

All Nurse Aide (NA) Training Programs in South Dakota must be approved by the South Dakota Board of Nursing pursuant to ARSD 44:04:18:15. Approval status is granted for a two-year period. Written approval or denial of approval will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing 722 Main Street, Suite 3 Spearfish, SD 57783

Specificity 2.2
Name of Institution: Bethesda Home - Webster  Address: 129 West Hwy 12  Webster SD 57274  Phone Number: (205) 345.3331  Fax Number: (205) 345-3325  E-mall Address of Faculty: nikki. Kwasniewski @ Sanfordheatth. Org
Select option(s) for Re-Approval:  Request re-approval without changes to program coordinator, primary instructor, supplemental personnel or curriculum  1. List personnel and licensure information 2. Complete evaluation of the curriculum Request re-approval with faculty changes and/or curriculum changes 1. List personnel and licensure information, attach curriculum vitas, resumes, or work history for new personnel 2. Complete evaluation of the curriculum 3. Submit documentation to support requested curriculum changes

#### List Personnel and Licensure Information: 1.

Program Coordinator must be a registered nurse with 2 years nursing experience, at least one of which is in the provision of long-term care services. The Director of Nursing (DON) may serve simultaneously as the program coordinator but may not perform training while serving as DON. (ARSD 44:04:16:10)

but may not perform defining			RN LICENSE	
Name of Program Coordinator	State	Number	Cintration	Verification (Completed by SDBON)
Pom Connor RN	90		03/03/2015	
☐ If requesting new Program Coordin	nator, attach cur	riculum vita, resum	te, or work history	Last and which is in the

Primary Instructor must be a licensed nurse (RN or LPN) with 2 years nursing experience, at least one of which is in the provision of long-term care services. The primary instructor is the actual teacher of course material. (ARSD 44:04:18:11)

provision of long-term care services.		RN OR LAN LICENSE			
Name of Primary Instructor	Stata	Number	Eveletion.	(Completed by SDBON)	
MIKKI KWASNIEWSKI RIV	50	1803349	1110712014	d attach documentation	
Mikki kwosniewski RiV  ☐ If requesting new Primary Instructor, a	attach currici	ulum vita, resume,	or work history, at	itation of completing a	

If requesting new Primary Instructor, attach curriculum vita, resume, or work history, and attach documentation supporting previous experience in teaching adults within the past five years or documentation of completing a course in the instruction of adults.

Supplemental Personnel may assist with instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12) If requesting new Supplemental Personnel, attach curriculum vita, resume, or work history.



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	LICENSURE		RE/REGISTRATIO	Verification
upplemental Personnel & Credentials	State	Number	Expiration	(Completed by SDBON)

Complete Evaluation of the Curriculum: Indicate compliance relative to each standard during the previous two years. Explain any "no" responses on a separate sheet of paper. (Pursuant to ARSD 44:04:18 07, the Department of Health may conduct an unannounced on-site visit to determine compliance with requirements.) 2.

Department of Health may conduct an one	Yes	No
Standard	/	
Program was no less than 75 hours.  Provided minimum 16 hours of instruction prior to students having direct patient	/	
contact.  Provided minimum 16 hours of supervised practical instruction; instructor ratio did not exceed 8	V	
students for one instructor.  Provided instruction on each content area (see ARSD 44:04:18:15):	سما	
Provided instruction on each content area (See Artists	V	-
Basic nursing skills	/	
Personal care skills	V	
Mental health and social services	V	
Care of cognitively impaired clients	V	
Basic restorative nursing services	مرا	
<ul> <li>Residents' rights</li> <li>Students did not perform any patient services until after the primary instructor found the student</li> </ul>	V	
to be competent under the supervision of a licensed nurse	V	1-
<ul> <li>Students only provided patient services under the supervision of a licensed nurse</li> <li>Your agency maintains a 75% pass rate of students on the competency evaluation (written and skills exam taken through the SD Healthcare Association).</li> </ul>	200	13

3. <u>C</u> Name o	Documentation to Support Curriculum/Curriculums Used:  If Course/Courses and edition of text used: Yursung Assisting Essentials for Long-Term Course  - Loke Area Technical Institute Unline: Program— Woder to y of teaching methods may be utilized in achieving the classroom instruction such as independent study, video	Delmarally Flublisher Jun 50
instruction Sub	on, and online instruction.  omit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc).  omit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc).  documentation that supports requirements listed in ARSD 44:04:18:15, including:  documentation that supports requirements listed in ARSD 44:04:18:15, including:  documentation that supports requirements for each unit of curriculum  naviorally stated objectives with measurable performance criteria for each unit of curriculum  A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include:  A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include:  A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective  A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective  care; the instructor ratio may not exceed eight students for one instructor.  care; the instructor ratio may not exceed eight students for one instructor.	next time
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GREAT PACES	ACES BATEAN PLACES.	h care: dressing; toileting; assisting with					
	Personal care skills, including: bathing; grooming, including mout eating and hydration; feeding techniques; skin care; and transfer eating and hydration; feeding techniques; responding appropria	s, positioning, and turning;					
۵	eating and hydration, feeding techniques, responding appropriate Mental health and social services, including: responding appropriate mental health and social services, including:	eating and hydration; feeding techniques; skin care; and transfers, positioning; awareness of Mental health and social services, including: responding appropriately to behaviors; awareness of Mental health and social services, including: responding appropriately to behaviors; awareness of Mental health and social services, including: responding appropriately to behaviors; awareness of developmental tasks associated with aging process; respecting personal choices and preserving client developmental tasks associated with aging process; respecting personal choices and preserving client					
	developmental tasks associated with aging process,						
	dignity, and recognizing sources of emotional support;  Care of cognitively impaired clients, including: communication an	d techniques for addressing unique					
Ц	needs and behaviors;	needs and behaviors;					
	and training; and care and use of prostrictic and or thousand and	mination: reporting grievances and					
	Residents' rights, including: privacy and commentative of personal possessions: promoting an						
	disputes; participating in groups and activities; security or person environment free from abuse, mistreatment, and neglect and requirement.	uirement to report; avoiding resultings.					
_	Coordinator Signature: Nikki Kwosniewski RN	Date: 4-26-13					
Program Coo	coordinator Signature: 11000						
This section	on to be completed by the South Dakota Board of Nursing						
	The Application D	penied:					
Date Applical	Cation Received.						
Expiration Da	Date of Approval:						
Board Repre	presentative:						
Date Notice	Ce Selic to Institution.	1 1					
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	INPOLORE TEXT						